



MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS  
DIVISION OF LABOR STANDARDS

**ENTERTAINMENT WORK PERMIT REQUEST**

P.O. Box 449  
Jefferson City, MO 65102-0449  
Phone (573) 751-3403  
Fax (573) 751-3721

I, \_\_\_\_\_, am requesting an entertainment work permit  
for my child, \_\_\_\_\_, to work in the entertainment field  
within the state of Missouri. It is with my consent that my child performs for the various performing arts  
assignments that may be offered to my child.

I would like to request a waiver for the provisions of the regular work hours described in Section 294.030  
RSMo.

Attached you will find a copy of my child's birth certificate (or other form of proof of age).

Would you please forward the permit to:

\_\_\_\_\_  
Parent's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

**Mail to: Division of Labor Standards  
P.O. Box 449  
Jefferson City, MO 65102  
OR  
Fax: (573) 751-3721**